

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/580239

FILING DATE

11 JAN 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	✓					
2		✓				
3		✓				
4		✓				
5		✓				
6		✓				
7		✓				
8		✓				
9		✓				
10		✓				
11		✓				
12			1			
13				1		
14				2		
15				1		
16				1		
17				1		
18				1		
19				3		
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TOTAL IND.	✓	↓	1	↓		↓
TOTAL DEP.	14	←	14	←		←
TOTAL CLAIMS	12		15			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						